

**TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT**  
(Under 37 CFR 1.97(b) or 1.97(c))Rec'd PCT/PTO 24 JAN 2005  
Docket No.  
DC5136 PCT 1In Re Application Of: **BERRY et al.**

Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.
			00137		

Title: **SILICONE RESIN FOR DRILLING FLUID LOSS CONTROL**

Address to:  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, VA 22313-1450**

**37 CFR 1.97(b)**

1. ☒ The Information Disclosure Statement submitted herewith is being filed within three months of the filing of a national application other than a continued prosecution application under 37 CFR 1.53(d); within three months of the date of entry of the national stage as set forth in 37 CFR 1.491 in an international application; before the mailing of a first Office Action on the merits, or before the mailing of a first Office Action after the filing of a request for continued examination under 37 CFR 1.114.

**37 CFR 1.97(c)**

2. ☐ The Information Disclosure Statement submitted herewith is being filed after the period specified in 37 CFR 1.97(b), provided that the Information Disclosure Statement is filed before the mailing date of a Final Action under 37 CFR 1.113, a Notice of Allowance under 37 CFR 1.311, or an Action that otherwise closes prosecution in the application, and is accompanied by one of:
- ☐ the statement specified in 37 CFR 1.97(e);
- OR**
- ☐ the fee set forth in 37 CFR 1.17(p).

10/523149

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 Title: **SILICONE RESIN FOR DRILLING FLUID LOSS CONTROL**
**Payment of Fee**

(Only complete if Applicant elects to pay the fee set forth in 37 CFR 1.17(p))

- ☐ A check in the amount of \_\_\_\_\_ is attached.
- ☐ The Director is hereby authorized to charge and credit Deposit Account No. \_\_\_\_\_ as described below.
- ☐ Charge the amount of \_\_\_\_\_  
☐ Credit any overpayment.  
☐ Charge any additional fee required.
- ☐ Payment by credit card. Form PTO-2038 is attached.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

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 Signature of Person Mailing Correspondence *Kelly Smith*

KELLY SMITH

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\*This certificate may only be used if paying by deposit account.

*Patricia M Scaduto*  
 Signature

 Dated: *Jan 24, 2005*

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**MIDLAND, MI 48686-0994**

CC:

<b>INFORMATION DISCLOSURE CITATION</b> <i>(Use several sheets if necessary)</i>	ATTY DOCKET NO. <b>DC5136 P</b>	APPLICATION NO. <b>10/523148</b>
APPLICANT(S) <b>BERRY et al.</b>		DT05 Rec'd PCT/PTO <b>24 JAN 2005</b>
FILING DATE		GROUP ART UNIT

**U.S. PATENT DOCUMENTS**

*EXAMINER INITIAL	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
	6,180,236	01/30/2001	HAMADA et al.	428	402	
	5,973,060	10/26/1999	OZAKI et al.	524	506	
	6,107,429	08/22/2000	SOJKA	526	323.2	
	3,302,719	02/07/1967	FISCHER	166	42	
	3,882,029	05/06/1975	FISCHER et al.	252	8.55	

**U.S. PATENT APPLICATION PUBLICATIONS**

*EXAMINER INITIAL	DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE

**FOREIGN PATENT DOCUMENTS**

		DOCUMENT NUMBER	DATE	COUNTRY	CLASS	SUBCLASS	TRANSLATION	
							YES	NO

**OTHER DOCUMENTS** *(Including Author, Title, Date, Pertinent Pages, Etc.)*


**EXAMINER**

**DATE CONSIDERED**

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<b>INFORMATION DISCLOSURE CITATION</b> <i>(Use several sheets if necessary)</i>	ATTY DOCKET NO. DC5136 PCT 1	APPLICATION NO. <b>10/523148</b>
	BERRY et al. <b>DI05 Rec'd PCT/PTO 24 JAN 2005</b>	
	FILING	GROUP ART

U.S. PATENT DOCUMENTS							
*EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE
		3,954,629	05/04/1976	SCHEFFEL et al.	252	8.5	
		6,196,316	03/06/2001	BOSMA et al.	166	294	

U.S. PATENT APPLICATION PUBLICATIONS							
*EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE IF APPROPRIATE

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